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Bib Data Sheet

CONFIRMATION NO. 7261

|  |   |                                  |   |                                     |
|--|---|----------------------------------|---|-------------------------------------|
| <b>SERIAL NUMBER</b><br>10/535,564   | <b>FILING OR 371(c) DATE</b><br>05/19/2005<br><b>RULE</b>   | <b>CLASS</b><br>004              | <b>GROUP ART UNIT</b><br>3751   | <b>ATTORNEY DOCKET NO.</b><br>94165 |
| <b>APPLICANTS</b><br>Francisco Zurita Arguelles, Torremolinos, SPAIN; <i>KAM</i>   |   |                                  |   |                                     |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/ES04/00023 01/20/2004 <i>KAM</i> —   |   |                                  |   |                                     |
| <b>** FOREIGN APPLICATIONS *****</b><br>SPAIN U 200301394 06/06/2003 — <i>KAM</i> —  |   |                                  |   |                                     |
| <b>** SMALL ENTITY **</b>  |   |                                  |   |                                     |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met<br>Verified and Acknowledged <i>[Signature]</i> <i>KAM</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>SPAIN | <b>SHEETS DRAWING</b><br>1  | <b>TOTAL CLAIMS</b><br>1            |
| <b>INDEPENDENT CLAIMS</b><br>1   |   |                                  |   |                                     |
| <b>ADDRESS</b><br>Collen IP<br>The Holyoke-Manhattan Building<br>80 South Highland Avenue<br>Ossining, NY 10562  |   |                                  |   |                                     |
| <b>TITLE</b><br>Urine collector for female use   |   |                                  |   |                                     |
| <b>FILING FEE RECEIVED</b><br>450  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                     |